

THE ANDAMAN ISLANDERS

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To truly primitive peoples like the Onges, European medical practices are fascinating. Men and women will refuse literally nothing once they are convinced of our intention to do them good and cure their ills. Although they have a rudimentary form of medicine, they recognize the superiority of European methods, and medical aid has therefore become our most powerful means of making contact with uncivilized peoples.

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While I was busy trying to alleviate their ailments I became aware of the power which 'medicine' has over them, and I was also able to observe their own methods of dealing with their ills. Understandably, disease, death and birth are all attributed to particular supernatural beings, or to the spirits of the dead. They try not to offend these beings, but strive nevertheless, in their own way, at least to cure disease. Once primitive peoples see our methods they respect them, and are eager to be treated; strange though it all seems, they develop a blind faith in the omnipotence of the new ways.

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There is little actual disease among the Onges and they have equally few vices. They are still unaware of the existence of alcohol, and have not learned how to ferment sugar substances, such as the honey in which the Little Andaman abounds. Tobacco is a recent introduction, and the Onges at once became wildly addicted to it; the tobacco leaves I had taken with me were in fact my best means of making my way peacefully into the island. A few Onges have acquired a supply of opium from Burmese and Chinese smugglers along the north coast, but instead of smoking it they seem to limit themselves to chewing it mixed with tobacco, and have fortunately no means of replenishing their stock.

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Polio, tuberculosis, smallpox and cancer seem unknown, but for some unknown reason the islands have on a number of occasions been struck by disastrous epidemics of measles. These epidemics struck nearly every member of some of the communal huts, judging from survivors' reports, and the sites were afterwards abandoned, leaving the huts to be destroyed by termites.

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The census of 1931 includes a personal observation by Portman of congenital syphilis in several Onges. This has since been proved wrong and in 1932 I found only one young man with nasal malformation possibly attributable to the disease, half-moon incisors, and abnormality of the skull and palate. I was not able to find him

THE SPIRITS OF THE FOREST

Near my camp at Labanar, in March 1952, I witnessed a distressing and fatal case. A young woman, with a baby a month old, had suckled another child, as the Onge women do. The older infant, which had cut its teeth, caused damage to the nipples and the ensuing infection spread throughout the body. The wretched woman was writhing with fever and the pain from her infected breasts and suppressed lactation. Her body had been smeared with a vermilion ochre, held to be the most powerful balm, and tightly bound, as usual. Her condition was so poor that I suggested sending her at once to Port Blair for treatment. Unfortunately, however, at that time I was only just beginning to establish contact with the Onges, and the woman's husband, after all the arrangements had been made, refused to let her go. I had not yet gained the Onges' confidence enough to be allowed near the woman, and although I was able to photograph her I could do nothing to prevent her death. 757
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The decision to administer 'medicine' and subject patients to various treatments is not the province of any specialists, but is taken by anyone in the group; all, including the patient, accept the decision, since all are utterly convinced that it will benefit them. Medicine men and sorcerers, so numerous in Africa and elsewhere, do not exist among the Andamanese. 75 ●

The Onges have not the slightest idea of any standards of hygiene. They never wash intentionally; the forest, dripping from every leaf, and frequent immersion in water while out hunting, take care of the problem. One must admit that in the circumstances their nakedness is hygienic. A small fire is kept burning beside each bed at night for warmth, a useful precaution which I found very welcome on the many cold nights which followed a very hot day. Deprived of these fires the Onges fall ill at once, a fact of which I had ample proof on several occasions when I took Onges with me out of Little Andaman; they were provided with beds and coverings in well-constructed wooden houses, but although none of them complained about the absence of the fires by their beds they all developed feverish chills. 515
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And yet in their own territory I have seen them lie soaking wet all night in one of their temporary forest camps or a communal hut with a leaking roof without any ill effects, simply because they had